

BUSINESS REPORT

**MONTANA HOUSE OF REPRESENTATIVES
64th LEGISLATURE - REGULAR SESSION**

HOUSE EDUCATION COMMITTEE

Date: Wednesday, January 21, 2015
Place: Capitol

Time: 3:00 PM
Room: 137

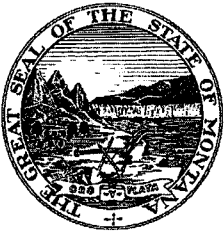
BILLS and RESOLUTIONS HEARD:

HB 158 - Revise and modernize immunization laws related to schools - Rep. Margaret (Margie) MacDonald

EXECUTIVE ACTION TAKEN: HB 87 DO PASS
HB 157 DO PASS AS AMENDED
HB 185 DO PASS AS AMENDED

Comments:


REP. Sarah Laszloffy, Chair



The Big Sky Country

MONTANA HOUSE OF REPRESENTATIVES

EDUCATION COMMITTEE

ROLL CALL

NAME	PRESENT	ABSENT/EXCUSED
REP. SARAH LASZLOFFY, CHAIR	✓	
REP. DEBRA LAMM, VICE CHAIR	✓	
REP. EDIE MCCLAFFERTY, VICE CHAIR	✓	
REP. BRYCE BENNETT	✓	
REP. JEFF ESSMANN	✓	
REP. MOFFIE FUNK	✓	
REP. EDWARD GREEF	✓	
REP. GREG HERTZ	✓	
REP. KATHY KELKER	✓	
REP. G. BRUCE MEYERS	✓	
REP. MATTHEW MONFORTON	✓	
REP. JEAN PRICE	✓	
REP. DANIEL SALOMON	✓	
REP. NICHOLAS SCHWADERER	✓	
REP. SUSAN WEBBER		✓

15 MEMBERS



HOUSE STANDING COMMITTEE REPORT

January 21, 2015

Page 1 of 1

Mr. Speaker:

We, your committee on **Education** recommend that **House Bill 87** (first reading copy -- white) **do pass.**

Signed:

Sarah Laszloffy
Representative Sarah Laszloffy, Chair

- END -

Committee Vote:

Yes 12, No 2

Fiscal Note Required X

HB0087002SC.hbb

CL
1/23/15
10:30



HOUSE STANDING COMMITTEE REPORT

January 21, 2015

Page 1 of 1

Mr. Speaker:

We, your committee on **Education** recommend that **House Bill 157** (first reading copy -- white) do pass as amended.

Signed: *Sarah Laszloffy*
Representative Sarah Laszloffy, Chair

And, that such amendments read:

1. Page 1, line 11.

Following: "lease for"

Insert: "up to 7 years for personal property and for up to"

Following: "15 years"

Insert: "for real property"

2. Page 1, line 18.

Following: "The"

Strike: "lease" on line 18 through "than" on line 19

Insert: "term of the lease may not exceed"

3. Page 1, line 20.

Strike: "of not more than"

Insert: "approved by the qualified electors, but not exceeding"

- END -

Committee Vote:

Yes 14, No 0

Fiscal Note Required ☐

HB0157002SC.hbb

CL
1/23/15
10:30



HOUSE STANDING COMMITTEE REPORT

January 21, 2015

Page 1 of 1

Mr. Speaker:

We, your committee on **Education** recommend that **House Bill 185** (first reading copy -- white) **do pass as amended.**

Signed: *Sarah Laszloffy*
Representative Sarah Laszloffy, Chair

And, that such amendments read:

1. Page 1, line 15.

Following: "money"

Strike: "may"

Insert: "must"

- END -

Committee Vote:

Yes 9, No 6

Fiscal Note Required X

HB0185001SC.hbb

U
1/22/15
10:30



The Big Sky Country

MONTANA HOUSE OF REPRESENTATIVES

EDUCATION COMMITTEE

ROLL CALL VOTE

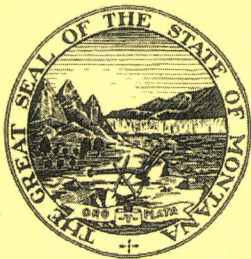
BILL NUMBER HB 185

DATE Jan. 21, 2015

MOTION _____

NAME	AYE	NO	PROXY
REP. DEBRA LAMM, VICE CHAIR		✓	
REP. EDIE MCCLAFFERTY, VICE CHAIR	✓		
REP. BRYCE BENNETT	✓		
REP. JEFF ESSMANN	✓		
REP. MOFFIE FUNK	✓		
REP. EDWARD GREEF	✓		
REP. GREG HERTZ		✓	
REP. KATHY KELKER	✓		
REP. G. BRUCE MEYERS		✓	
REP. MATTHEW MONFORTON		✓	
REP. JEAN PRICE	✓		
REP. DANIEL SALOMON	✓		
REP. NICHOLAS SCHWADERER		✓	
REP. SUSAN WEBBER	✓		✓
REP. SARAH LASZLOFFY, CHAIR		✓	

15 MEMBERS



The Big Sky Country

MONTANA HOUSE OF REPRESENTATIVES

AUTHORIZED COMMITTEE PROXY

I request to be excused from the

Education Committee

Committee because of other commitments. I desire to leave my proxy vote with:

Edith McChaffey

Indicate Bill number and your vote Aye or No. If there are amendments, list them by name and number under the bill and indicate a separate vote for each amendment.

BILL/AMENDMENT

AYE

NO

HB 185	X	
Amend		
H B 018501 AL5	X	

BILL/AMENDMENT

AYE

NO

Rep.

S. Webb

(Signature)

Susan A. Webb

Date

MONTANA House of Representatives
Visitors Register
HOUSE EDUCATION COMMITTEE

Wednesday, January 21, 2015

HB 158 - Revise and modernize immunization laws related to schools

Sponsor: **Rep. Margaret (Margie) MacDonald**

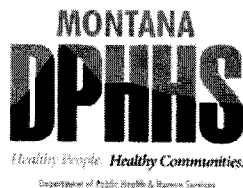
PLEASE PRINT

[illegible]

Please leave prepared testimony with Secretary. Witness Statement forms are available if you care to submit written testimony.

received
1-28-15
11:38 a.m.

Additional
Info. MB 158
DATE 1-28-15



Department of Public Health and Human Services

Public Health & Safety Division ♦ Communicable Disease Control & Prevention Bureau

PO Box 202951 ♦ 1400 Broadway ♦ Helena, MT 59602-2951

Voice: 406-444-0919 ♦ Fax: 406-444-3044

Steve Bullock, Governor

Richard H. Opper, Director

Date: 1/26/15

To: House Education Committee

From: Jim Murphy, Bureau Chief
Communicable Disease Control and Prevention Bureau
Public Health and Safety Division
Montana Department of Public Health and Human Services
444-4016

Regarding: Additional Information Requested on the **Advisory Committee on Immunization Practices (ACIP)** and Use of Exemptions in School and Day Care Settings

Thank you for the opportunity to clarify how important decisions regarding vaccination usage and national recommendations are made. Below is a short description of what the ACIP charter requires them to do, how they deliberate, and who comprises the group. In addition to the short description, more detailed information on the ACIP is attached.

What the ACIP Does: The ACIP was created over 50 years ago to provide advice and guidance to the Director of the the Centers for Disease Control and Prevention (CDC) regarding the most appropriate selection of vaccines and related agents for effective control of vaccine-preventable diseases in the civilian population. Recommendations made by the ACIP are reviewed by the CDC Director, and if adopted, are published as official CDC recommendations. These national recommendations generally describe who certain vaccines are recommended for and how and when they should be administered and followed by all states. It is important to note that ACIP and CDC recommend many vaccines and although public health promotes their use, they are not *required* in schools daycares or other settings. Examples of vaccines that are recommended but not required in any rule or statute in Montana include influenza, Human Papiloma Virus (HPV), the shingles vaccine as well as many others.

How ACIP Deliberates: ACIP holds three meetings each year at the CDC in Atlanta, Georgia to review scientific data and vote on vaccine recommendations. Meetings are open to the public and available online via live webcast. During committee meetings, members present findings and discuss vaccine research and scientific data related to vaccine effectiveness and safety, clinical trial results, and manufacturer's labeling or package insert information. Outbreaks of vaccine-preventable disease or changes in vaccine supply also are reviewed during these meetings. Vaccine recommendations include the age(s) when the vaccine should be given, number of doses needed, dosing interval, and precautions and contraindications to administration of vaccines. Meetings include opportunities for public comment and an example of an agenda for an upcoming meeting is attached.

Who comprises ACIP: The group consists of 15 voting members, an executive secretary, eight ex officio members from other government agencies, and liaison representatives from 26 health-related professional organizations and foundations. Voting members include a consumer representative as well as experts in infectious diseases, pediatrics, internal medicine, family medicine, virology, immunology, public health,

preventive medicine, vaccine research and policy, economics and cost-effectiveness. A current list of voting members is attached for your review.

Exemptions in Schools and Day Care Settings

The second issue that came up regarded medical and religious exemptions and the information below may help clarify some of the issues discussed.

School Settings

- Religious and medical exemptions are authorized by statute for school settings and that was not changed in HB158.
- DPHHS collects data on exemptions but does not review exemptions in these settings but may be asked occasionally for a consult. We are not aware of any recent consults in this setting.
- Schools report data each year regarding immunization status of students. The 2013-14 report indicated that approximately 143,000 students were reviewed and fewer than 1% exercised a medical exemption and 2% exercised a religious exemption.
- DPHHS feels that the present system with respect to schools works well and are not aware of any significant questioning related to either exemption.

Day Care Settings

While not addressed in HB158, the subject of exemptions in day care settings came up and may require clarification.

- Statutes related to day care settings allow medical exemptions and a religious exemption are specified for Haemophilus Influenzae Type b (Hib) Vaccine or Hib (52-2-735 Health protection -- certification required). DPHHS has carefully reviewed this issue and although unsure why Hib was singled out, the language is very specific and appears to only allow a religious exemption that single instance.
- Working with local public health authorities, DPHHS conducts reviews of day care immunization records to evaluate compliance with vaccination requirements. The process may include tracking statistics regarding exemptions.
- DPHHS has encouraged local public health jurisdictions to ensure that medical exemptions document valid medical concerns and reviews any identified as incomplete or inaccurate.
- Since this effort was initiated in late 2010, DPHHS has been asked to review 60 medical exemptions resulting in 22 letters to providers asking for clarification or additional documentation. This represents a small fraction of the over 15,000 records reviewed annually.
- Common medical contraindications for which clarification is requested have included: "parental fear of vaccination", "family history of allergies".
- DPHHS is not aware of any exclusions that have resulted from our attempts to clarify medical exemptions and does not encourage exclusions. Instead, we promote use of "conditional enrollment". Conditional enrollments allow students or attendees to catch up by following a schedule while still attending the setting.

The Advisory Committee on Immunization Practices (ACIP)

Updated February 2013

➤ For more information on vaccines, vaccine-preventable diseases, and vaccine safety:

<http://www.cdc.gov/vaccines/conversations>

- The Centers for Disease Control and Prevention (CDC) sets the U.S. childhood immunization schedule based on recommendations from the Advisory Committee on Immunization Practices (ACIP).
- Before recommending a vaccine the ACIP considers many factors, including the safety and effectiveness of the vaccine.
- Candidates for ACIP membership are screened carefully prior to being selected to join the committee.
- The ACIP develops vaccine recommendations for children and adults. The recommendations include the age(s) when the vaccine should be given, the number of doses needed, the amount of time between doses, and precautions and contraindications.

a vaccine manufacturer, excludes people from ACIP membership. However, because ACIP members are experts in the vaccine field, they may be involved in vaccine studies. Therefore, ACIP members who lead vaccine studies at their respective institutions may become ACIP members but they must abstain from voting on recommendations related to the vaccine they are studying. In addition, they cannot vote on any other vaccines manufactured by the company funding the research or on any vaccines that are similar to the one(s) they are studying.

Adult Immunizations Adults also need protection against several vaccine-preventable diseases. Therefore, in addition to the childhood immunization schedule, the ACIP makes recommendations for the adult immunization schedule. The ACIP considers many of the same factors for adult immunization recommendations that they consider when making recommendations about the childhood schedule. The professional organizations that work with the ACIP to develop the annual adult schedule include the American College of Obstetricians and Gynecologists (ACOG), the American College of Physicians (ACP), and the American Academy of Family Physicians (AAFP).

questions and answers

What is the ACIP?

The Advisory Committee on Immunization Practices (ACIP) is a group of medical and public health experts that develops recommendations on how to use vaccines to control diseases in the United States.

The ACIP consists of 15 experts who are voting members and are responsible for making vaccine recommendations. The Secretary of the U.S. Department of Health and Human Services (DHHS) selects these members after an application, interview, and nomination process. Fourteen of these members have expertise in vaccinology, immunology, pediatrics, internal medicine, nursing, family medicine, virology, public health, infectious diseases, and/or preventive medicine. One member is a consumer representative who provides perspectives on the social and community aspects of vaccination.

The ACIP works with 30 professional organizations that are highly regarded in the health field. Examples of these professional organizations with which ACIP develops the annual harmonized childhood schedule are the American Academy of Pediatrics (AAP) and the American Academy of Family Physicians (AAFP). These members comment on ACIP's recommendations and offer the perspectives of groups that will implement the recommendations.

People with certain vaccine-related interests at the time they apply for the ACIP are not considered for membership. For example, direct employment of a candidate or an immediate family member by a vaccine manufacturer, holding a patent on a vaccine or related product, or serving on a Board of Directors of

How does ACIP make decisions about vaccine recommendations?

The ACIP holds three meetings each year at the Centers for Disease Control and Prevention (CDC) in Atlanta, Georgia to make vaccine recommendations. Meetings are open to the public and available online via webcast. During these committee meetings, members present findings and discuss vaccine research and scientific data related to vaccine effectiveness and safety, clinical trial results, and manufacturer's labeling or package insert information. Outbreaks of vaccine-preventable disease or changes in vaccine supply, such as vaccine shortages, also are reviewed during these meetings. The recommendations include the age(s) when the vaccine should be given, the number of doses needed, the amount of time between doses, and precautions and contraindications.

In addition to these meetings, ACIP members participate in work groups. These work groups are active all year to stay up-to-date on specific vaccines and vaccine safety information. For example, before a vaccine is even licensed by the U.S. Food and Drug Administration (FDA), an ACIP work group will thoroughly review all available scientific information about the vaccine so that they will be prepared to present information to the ACIP about the vaccine once it is licensed. At this point, the vaccine already has undergone several phases of testing for safety and efficacy with potentially tens of thousands of volunteers. The licensure process could take several years. The work group carefully reviews data available on the vaccine in order to make recommendations to the ACIP, but work groups do not vote on the final recommendation. The work group presents its findings to the entire ACIP at several meetings before ACIP members vote on whether to recommend the vaccine and who should receive the vaccine. The committee's recommendations are forwarded to CDC's Director for approval. Once the ACIP recommendations have been approved by the CDC Director, they are published in CDC's Morbidity and Mortality



AMERICAN ACADEMY OF
FAMILY PHYSICIANS
STRONG MEDICINE FOR AMERICA

American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN™

Weekly Report (MMWR) and represent the official CDC recommendations for immunizations in the U.S.

Each year, the ACIP's recommendations result in a single childhood immunization schedule, approved by the CDC, AAP, and AAFP, designed to best protect children in the United States.

Setting the Immunization Recommendations for the Pertussis Vaccine

In the United States, pertussis (whooping cough) still circulates in communities nationwide and is particularly dangerous for young infants. In 2012, provisional data report that whooping cough made more than 41,000 people sick, and 14 babies died. Many of the babies were too young to be fully protected against whooping cough.

The ACIP also recommends that fathers, grandparents, older siblings, and other caregivers of infants get a one-time dose of Tdap for added protection. Infants need this early protection because they do not begin getting their own DTaP vaccines until they are 2 months old. They'll need 4 doses (at 2 months, 4 months, 6 months, 15 through 18 months). With each dose, they gain more protection against the disease. However, this disease protection fades over time. They'll need a booster dose when they are 4 through 6 years old.

What does the ACIP consider in the vaccine recommendation process?

The information that ACIP reviews for each vaccine always includes the following:

- **The safety and effectiveness of the vaccine when given at specific ages.** Only vaccines licensed by the FDA are recommended, and vaccine manufacturers must conduct rigorous studies to show that a vaccine is safe and effective at specific ages.
- **The severity of the disease.** Vaccines recommended for children prevent diseases that can be serious for them, potentially causing long-term health problems or death.
- **The number of children who get the disease if there is no vaccine.** Vaccines that do not provide benefit to many children may not be recommended for all children.
- **How well a vaccine works for children of different ages.** The immune response from a vaccine can vary depending on the age when the vaccine is given.

What does the ACIP consider when deciding at what age children should receive different vaccines?

The risk of disease and death at different ages is a main factor in deciding the best age to give each vaccine. The ACIP carefully examines data about each vaccine-preventable disease to determine at what ages the rates of the disease peak. Protection against vaccine-preventable disease at the earliest time possible is critical, especially for young children or other high risk groups, for whom a disease can be especially serious. For example, pertussis vaccine is recommended in the United States beginning at 2 months of age to protect infants. That timing saves lives that would otherwise be lost to the disease if vaccines were not given at a very young age.

The immunization schedule also is based on balancing the risk of being exposed to the disease against the added protection of vaccinating at the age that a vaccine works best. Before a vaccine is licensed by the FDA, extensive testing is done to determine the best ages to safely and effectively give the vaccine.

Where can I find ACIP's vaccine recommendations?

All of the ACIP's recommendations are posted on the CDC webpage at <http://www.cdc.gov/vaccines/recs/acip/default.htm>. Once they are reviewed and approved by the CDC's Director and the U.S. Department of Health and Human Services, recommendations are published in the CDC's Morbidity and Mortality Weekly Report (MMWR). The MMWR publication represents the final and official CDC recommendations for immunization of the U.S. population.

How can I learn more about the ACIP?

To learn more about the ACIP and see the schedule of ACIP meetings, review minutes and recommendations from previous meetings, and register for future meetings, visit the ACIP website: <http://www.cdc.gov/vaccines/recs/acip/default.htm>.

resources

Immunization Policy Development in the United States: The Role of the Advisory Committee on Immunization Practices by Jean C. Smith et al. *Annals of Internal Medicine*. January 2009; Vol 150: pages 45-49. <http://www.annals.org/content/150/1/45.full.pdf+html>

The structure, role, and procedures of the U.S. Advisory Committee on Immunization Practices (ACIP). By Jean C. Smith, *Vaccine* 2010 Vol 28S pages A68-A75. <http://www.cdc.gov/vaccines/recs/ACIP/downloads/article-2010-role-procedures-ACIP-508.pdf>

ACIP Meeting Dates, Meeting Agendas, Meeting Webcast, Minutes, Registration, Presentation Slides. <http://www.cdc.gov/vaccines/recs/acip/meetings.htm>

ACIP Membership List. <http://www.cdc.gov/vaccines/recs/acip/members.htm>

CDC's Morbidity and Mortality Weekly Report (MMWR): ACIP Recommended Immunization Schedules 2013. <http://www.cdc.gov/mmwr/preview/mmwr2013su.html>

Immunization Schedules for Children, Adolescents and Teens, and Adults. <http://www.cdc.gov/vaccines/recs/schedules/default.htm>

For more information on vaccines call 800-CDC-INFO (800-232-4636) or visit <http://www.cdc.gov/vaccines>.

DRAFT - January 21, 2015

MEETING OF THE ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES (ACIP)

Centers for Disease Control and Prevention

1600 Clifton Road, NE, Tom Harkin Global Communications Center, Kent "Oz" Nelson Auditorium

Atlanta, Georgia 30333

February 25-26, 2015

<u>AGENDA ITEM</u>	<u>PURPOSE</u>	<u>PRESIDER/PRESENTER(s)</u>
<u>Wednesday, February 25th</u>		
8:00 Welcome & Introductions		Dr. Jonathan Temte (ACIP Chair) Dr. Larry Pickering (ACIP Executive Secretary; CDC)
8:30 Meningococcal Vaccines <ul style="list-style-type: none">· Introduction· GRADE evidence for use of serogroup B meningococcal (MenB) vaccine in high-risk groups· Proposed recommendations for use of MenB vaccine in high-risk groups· VFC Vote· Potential impact and cost effectiveness of routine use of MenB vaccine in adolescents· Considerations for routine use of MenB vaccines in adolescents· Public Comment	Information & Discussion <u>Vote</u> <u>VFC Vote</u> Information & Discussion	Dr. Lorry Rubin (ACIP, WG Chair) Dr. Temi Folaranmi (CDC/NCIRD) Ms. Jessica MacNeil (CDC/NCIRD) Dr. Jeanne Santoli (CDC/NCIRD) Dr. Ismael Ortega-Sanchez (CDC/NCIRD) Ms. Jessica MacNeil (CDC/NCIRD)
10:45 Break		
11:15 General Recommendations on Immunization <ul style="list-style-type: none">· Introduction· Altered immunocompetence; special situations; vaccination records & programs; vaccine information sources· General recommendations	Information & Discussion <u>Vote</u>	Dr. Marietta Vázquez (ACIP, WG Chair) Dr. Andrew Kroger (CDC/NCIRD) Dr. Andrew Kroger (CDC/NCIRD)
12:30 Lunch		
1:45 Hexavalent Vaccine Work Group <ul style="list-style-type: none">· Introduction: New Hib/HepB/DTaP/IPV vaccine	Information	Dr. Art Reingold (ACIP, WG Chair)
1:50 Influenza <ul style="list-style-type: none">· Introduction· Influenza surveillance update· Preliminary 2015-14 vaccine effectiveness estimates· Update Live Attenuated Influenza Vaccine (LAIV)· TBD· Proposed recommendations· Quadrivalent intradermal influenza vaccine	Information & Discussion <u>Vote</u> Information	Dr. Ruth Karron (ACIP, WG Chair) TBD Dr. Brendan Flannery (CDC/NCIRD) TBD TBD Dr. Lisa Grohskopf (CDC/NCIRD) TBD
3:30 Break		
4:00 Yellow Fever Vaccine <ul style="list-style-type: none">· Introduction· Summary of GRADE for yellow fever vaccine booster doses· Consideration of booster doses in specific populations· Proposed recommendations for yellow fever vaccine booster dose	Information & Discussion <u>Vote</u>	Dr. Joseph Bocchini (ACIP, WG Chair) Dr. Erin Staples (CDC/NCEZID)
5:00 Influenza A (H5N1) Vaccine <ul style="list-style-type: none">· Introduction· Vaccine policy options	Information & Discussion <u>Vote</u>	Dr. Doug Campos-Outcalt (ACIP, WG Chair) Dr. Sonja Olsen (CDC/NCIRD)
5:30 Public Comment		
5:45 Adjourn		

DRAFT - January 21, 2015

Thursday, February 26th

- | | | | |
|-------|---|---|---|
| 8:00 | Unfinished Business | | Dr. Jonathan Temte (Chair, ACIP) |
| 8:15 | Agency Updates | | |
| | CDC, CMS, DoD, DVA, FDA, HRSA, IHS, NVPO, NIH | Information | CDC and <i>ex officio</i> members |
| 8:30 | Human Papillomavirus (HPV) Vaccines | | |
| | <ul style="list-style-type: none"> • Introduction • Post licensure HPV vaccine safety summary and update • Summary of HPV9 clinical trial data and GRADE • Overview of cost effectiveness • Proposed recommendations for use of HPV9 vaccine • VFC vote | Information &
Discussion

<u>Vote</u>
<u>VFC Vote</u> | Dr. Joseph Bocchini (ACIP, WG Chair)
Ms. Julianne Gee (CDC/ISO)
TBD
Dr. Harrell Chesson (CDC/NCHHSTP)
Dr. Lauri Markowitz (CDC/NCHHSTP)
Dr. Jeanne Santoli (CDC/NCIRD) |
| 10:00 | Smallpox Vaccine: use in laboratory personnel | Information &
Discussion | |
| | <ul style="list-style-type: none"> • Introduction • Revised smallpox vaccine recommendations | <u>Vote</u> | Dr. Lee Harrison (ACIP, WG Chair)
Dr. Brett Petersen (CDC/NCEZID) |
| 10:45 | Break | | |
| 11:15 | Vaccine Supply | | Dr. Jeanne Santoli (CDC/NCIRD) |
| 11:25 | Hepatitis Vaccines | | |
| | <ul style="list-style-type: none"> • Introduction • Shortening the interval for postvaccination serologic testing for infants born to hepatitis B-infected mothers | | Dr. Arthur Reingold (ACIP, WG Chair)
Dr. Sarah Schillie (CDC/NCHHSTP) |
| 11:40 | Pertussis | | |
| | <ul style="list-style-type: none"> • Introduction • Cocooning and Tdap vaccination • Research to practice: developing a maternal Tdap vaccination campaign | | Dr. Art Reingold (ACIP, WG Chair)
Dr. Jennifer Liang (CDC/NCIRD)
Ms. Allison Fisher (CDC/NCIRD) |
| 12:40 | Public Comment | | |
| 1:00 | Adjourn | | |

Acronyms

CDC	Centers for Disease Control & Prevention
CMS	Centers for Medicare and Medicaid Services
DOD	Department of Defense
DVA	Department of Veterans Affairs
FDA	Food and Drug Administration
GRADE	Grading of Recommendations Assessment, Development and Evaluation
HRSA	Health Resources and Services Administration
IHS	Indian Health Service
NCHHSTP	National Center for HIV, Hepatitis, STD and TB Prevention [of CDC/OID]
NCIRD	CDC National Center for Immunization & Respiratory Diseases [of CDC/OID]
NCEZID	National Center for Emerging and Zoonotic Diseases [of CDC/OID]
NIH	National Institutes of Health
NVPO	National Vaccine Program Office
Tdap	Tetanus, Diphtheria, and acellular Pertussis Vaccine
VFC	Vaccines for Children
WG	Work Group

PROFESSIONAL AREA BREAKDOWN - ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES
Authorized Public Positions - 15 (including 1 Lay Member)

<u>CURRENT MEMBERS</u>	<u>TERM ENDING</u>	<u>EXPERTISE</u>	<u>MINORITY</u>	<u>FEMALE</u>	<u>PROF</u>	<u>LAY</u>	<u>GEOG. DIST.</u>
Bennett	6/30/2015	Internal Medicine; Preventive Medicine; Public Health		X	X		NY
Bocchini	6/30/2015	Pediatrics; Infectious Diseases			X		LA
Campos-Outcalt	6/30/2015	Family Medicine; Evidence-Based Medicine; Public Health			X		AZ
Temte*	6/30/2015	Family Medicine; Evidence-Based Medicine			X		WI
Vazquez	6/30/2015	Pediatrics; Infectious Diseases	X	X	X		CT
Harriman	6/30/2016	Nursing; State Health Department; Immunization Program Implementation					
Harrison	6/30/2016	Internal Medicine; Infectious Diseases		X	X		CA
Karron	6/30/2016	Pediatrics; Infectious Diseases		X	X		PA
Rubin	6/30/2016	Pediatrics; Infectious Diseases			X		MD
Kempe	6/30/2017	Pediatrics		X	X		NY
Pellegrini	6/30/2017	Consumer Representative		X			CO
Reingold	6/30/2017	Epidemiology; Public Health; Internal Medicine		X	X	X	DC
Riley		Obstetrics & Gynecology; Infectious Diseases; Maternal Fetal Medicine					CA
Belongia	6/30/2018	Internal Medicine; Epidemiology	X	X	X		MA
Romero	6/30/2018	Pediatrics; Infectious Diseases	X		X		WI
					X		AR

Chair*

Number of *Ex Officio* Members: 8

A member may serve up to 180 days after the expiration of that member's term if a successor has not taken office.